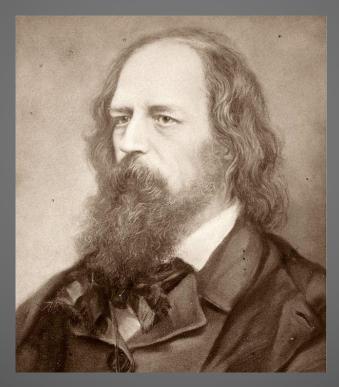
A lie that is half-truth is the darkest of all lies



Alfred Tennyson

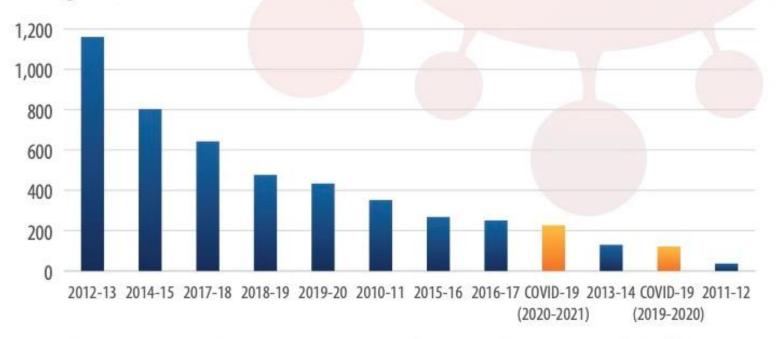
Unless otherwise indicated, all information that follows comes from carefully vetted mainstream sources

1. How dangerous is COVID-19?

The flu season of 2012 was far deadlier for people aged 0-17 years

Influenza Deaths of Children Aged 0-17 (2010-2020) vs. COVID-19 Deaths of Children Aged 0-17 in the U.S.

As of August 4, 2021



Sources: CDC.gov, First Trust Advisors. Measurement period spans week 40 - week 39 of the following year

The infection fatality rate for young people infected with COVID is barely measurable

Estimated Global COVID-19 Infection Fatality and Survival Rates

As of July 13, 2021

Age	Median IFR	Survival Rate Estimate	
0-19	0.0027%	99.9973%	
20-29	0.014%	99.9860%	
30-39	0.031%	99.9690%	
40-49	0.082%	99.9180%	
50-59	0.27%	99.7300%	
60-69	0.59%	99.4100%	

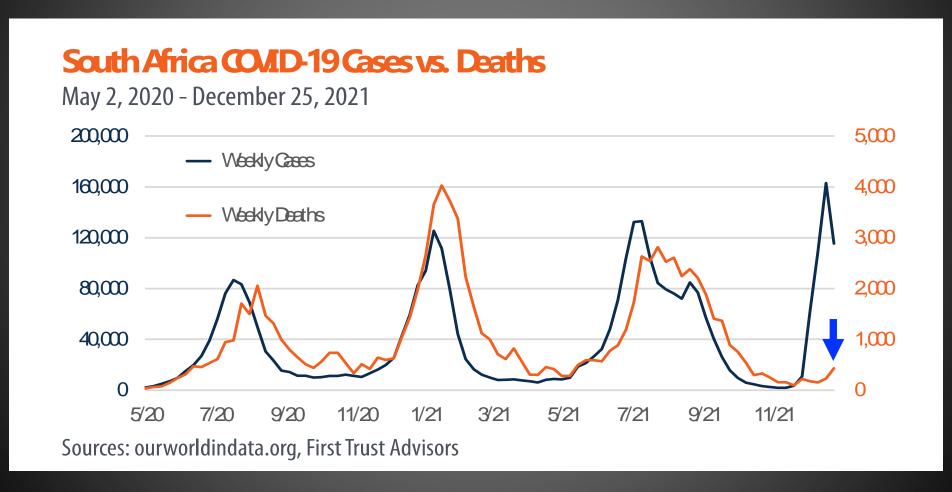
Sources: medrxiv.org, First Trust Advisors. IFR = Infection Fatality Rate.

The overall infection fatality rate for COVID-19 improved dramatically in weeks leading to 2022



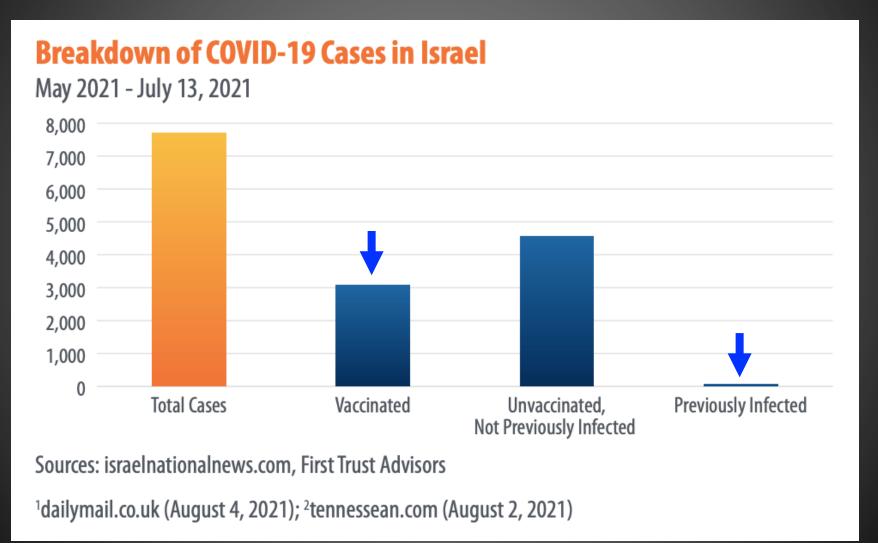
Sources: CDC.gov, First Trust Advisors. Case fatality rate is calculated as the ratio between the 7-day average number of deaths and the 7-day average number of cases 10 days earlier.

COVID-19 death rates in South Africa barely changed despite the spike in cases for the Omicron variant Less that 50% of the adult population is vaccinated



2. How effective is natural immunity for mitigating transmission of COVID-19?

Natural immunity is far more effective than immunity by means of vaccination

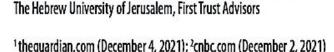


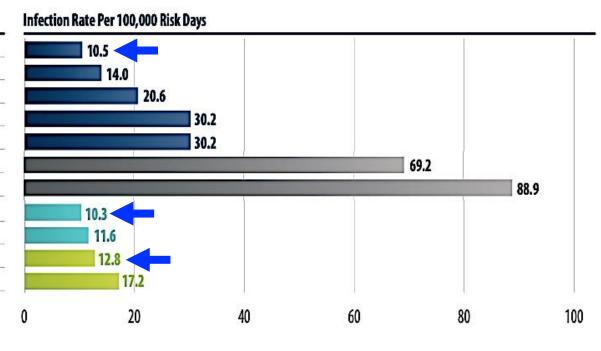
Vaccination fails to provide additional protection to people with natural immunity to COVID-19

Infection Rate by Type of Immunity

Measuring period: August - September 2021

Immunity-Conferring Event	Time Elapsed From Event	
Recovered	4-6 months	
	6-8 months	
	8-10 months	
	10-12 months	
	12+ months	
Fully Vaccinated	4-6 months	
	6-8 months	
Recovered then Vaccinated	4-6 months	
	6-8 months	
Vaccinated then Recovered	4-6 months	
	6-8 months	





12.10.21 | www.ftportfolios.com

The CDC recently admitted they have is no evidence that unvaccinated people who recovered from COVID had ever transmitted this disease to anyone else

The Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) received your September 02, 2021, Freedom of Information Act (FOIA) request on September 02, 2021, seeking:

"Documents reflecting any documented case of an individual who: (1) never received a COVID-19 vaccine; (2) was infected with COVID-19 once, recovered, and then later became infected again; and (3) transmitted SARS-CoV-2 to another person when reinfected."

A search of our records failed to reveal any documents pertaining to your request. The CDC Emergency Operations Center (EOC) conveyed that this information is not collected.

Downloaded from:

https://twitter.com/MichaelPSenger/status/1458953737397948418?ref_src=twsrc%5Etf w%7Ctwcamp%5Etweetembed%7Ctwterm%5E1458953737397948418%7Ctwgr%5E%7Ct wcon%5Es1_&ref_url=https%3A%2F%2Fwww.thegatewaypundit.com%2F2021%2F11%2F cdc-admits-no-record-unvaccinated-person-spreading-covid-recovering-covid%2F 3. How effective are the vaccines for mitigating transmission of COVID-19?

COVID-19 vaccines do not stop viral transmission



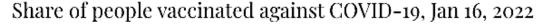
Downloaded from "UC Davis" https://www.ucdavis.edu/health/covid-19/news/viral-loads-similar-between-vaccinated-and-unvaccinated-people

COVID vaccines play no role in mitigating viral transmission This can be corroborated by comparing data from other nations

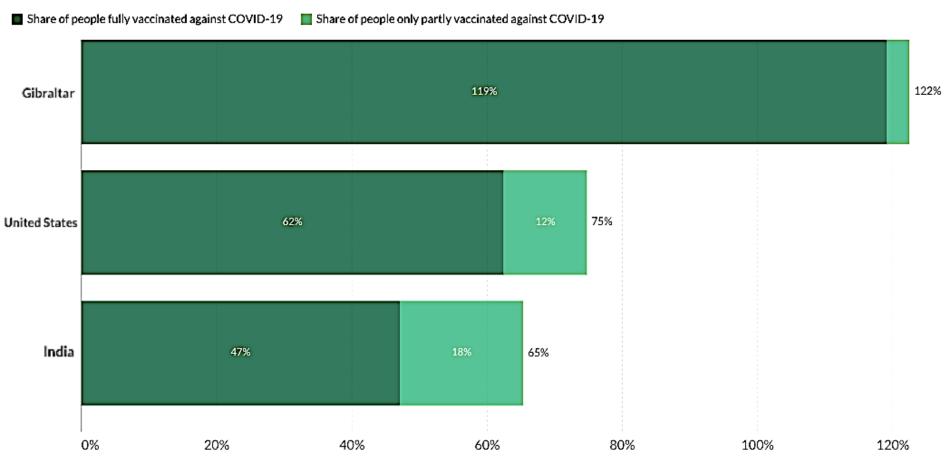


Downloaded from Bloomberg Business: https://twitter.com/business/status/1453772598504919041?ref_src=twsrc%5Etfw%7Ctwcamp%5E
https://www.revolver.news/

The island of Gibraltar is one of the most vaccinated regions on Earth How has 119% vaccination affected the transmission rate of COVID-19?



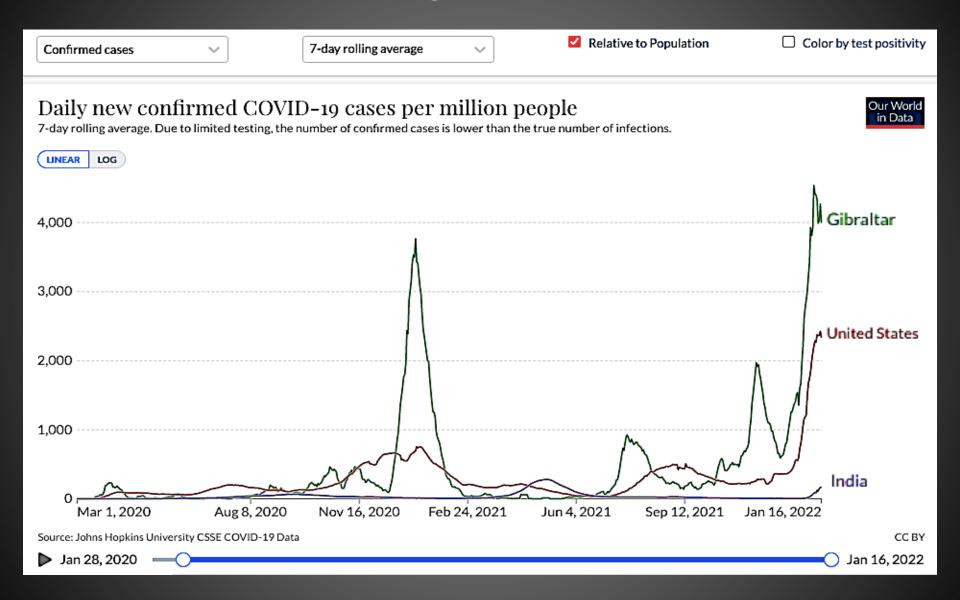




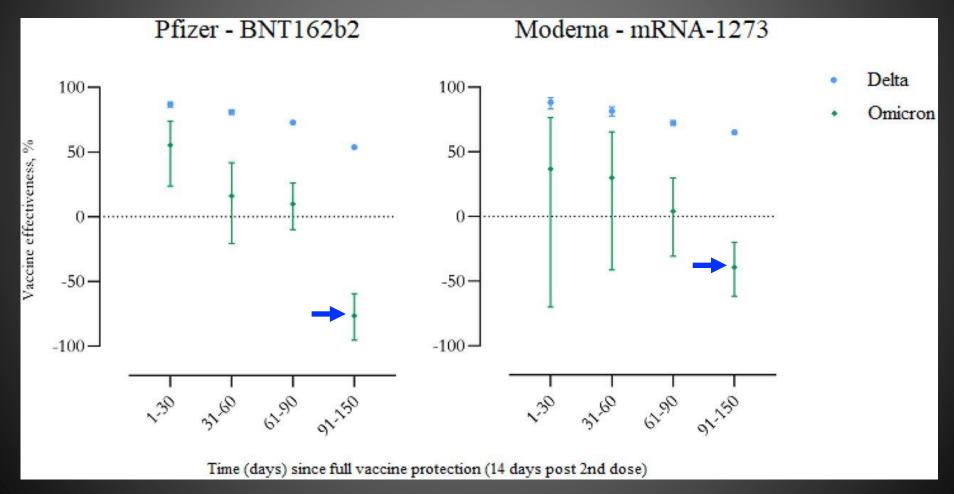
Source: Official data collated by Our World in Data
Note: Alternative definitions of a full vaccination, e.g. having been infected with SARS-CoV-2 and having 1 dose of a 2-dose protocol, are ignored to maximize comparability between countries.

CC BY

Gibraltar has one of the highest infection rates in the world

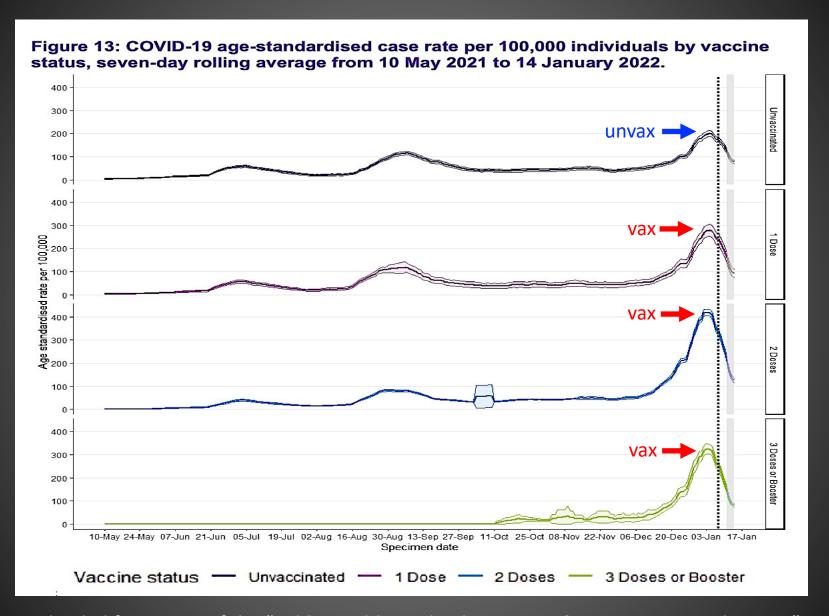


This study shows *negative* vaccine efficacy for Omicron after 90 days
This means that vaccination *increases* the likelihood of getting infected
Even though this study is just a "preprint" (not yet peer reviewed),
data collected in other nations appears to corroborate these findings



Hansen et al. 2021 : https://www.medrxiv.org/content/10.1101/2021.12.20.21267966v3.full

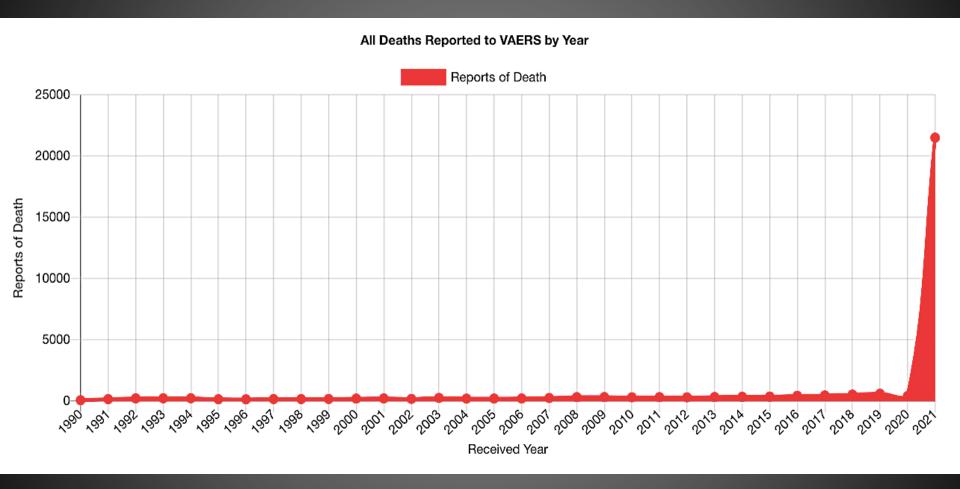
In Scotland, vaccinated people are getting infected at much higher rates



Downloaded from p. 40 of the "Public Health Scotland COVID-19 & Winter Statistical Report" https://publichealthscotland.scot/media/11223/22-01-19-covid19-winter_publication_report.pdf

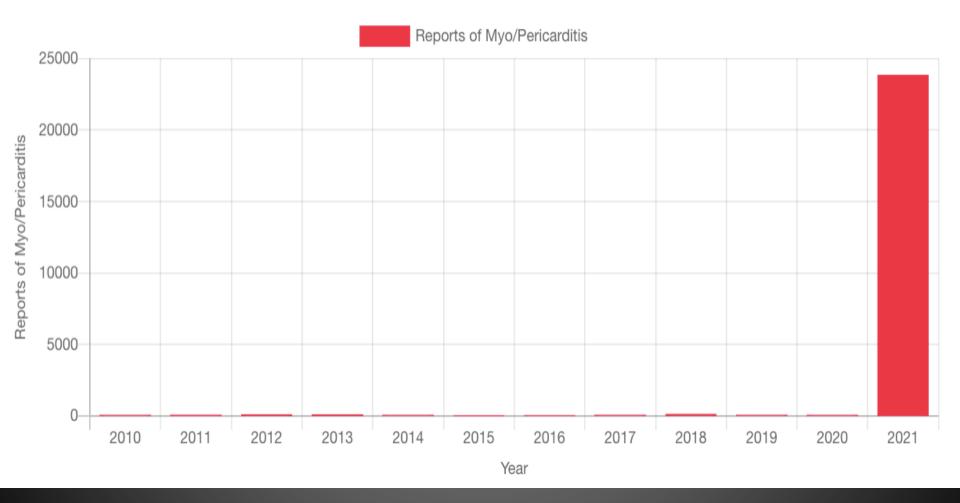
4. What are disadvantages of mass vaccination against COVID-19?

Vaccine-related deaths spiked by 50X in 2021



Vaccine-related heart inflammation spiked by nearly 1000X in 2021





Even the CDC reported a massive increase in vaccine-related myocarditis in young men

Expected vs. Observed reports after mRNA vaccination dose 2, 7-day risk period (N=765)*

Age group, years	Females		Males	
	Cases of myopericarditis, expected	Cases of myopericarditis, observed	Cases of myopericarditis, expected	Cases of myopericarditis, observed
12-15*	0–3	12	1–5	117
16–17*	0–2	15	0–3	121
18-24*	1–8	24	1–11	213
25-29*	1–6	16	1–9	56
30–39	2–21	10	2–19	72
40–49	2–22	22	2–19	45
50-64	4–40	15	4–35	13
65+	4–44	6	4–36	8



^{*} As of Aug 18, 2021; assumes a 7-day observation window, with 765 of 897 reports after mRNA vaccines occurring during Days 0–6 after vaccination; counts among 12–29 years from reports meeting case definition for myopericarditis; expected estimates for females 12–29 years adjusted to reflect reduced incidence in this age group

Downloaded from "Myopericarditis following COVID-19 vaccination: Updates from the Vaccine Adverse Event Reporting System (VAERS)" Aug 30, 2021

https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2021-08-30/03-COVID-Su-508.pdf

Some nations are now restricting access to the Moderna vaccine based on this data



Home / Food Safety & Health

Taiwan halts 2nd-dose BioNTech vaccinations for ages 12-17 amid concerns of myocarditis

CECC says approval of COVID vaccines for children under 12 will not be considered until 2nd dose issue settled



By George Liao, Taiwan News, Staff Writer 2021/11/10 15:42

Sweden extends pause of Moderna vaccine for younger age group



FILE PHOTO: Vial labelled "Moderna coronavirus disease (COVID-19) vaccine" placed on displayed EU flag is seen in this illustration picture

Downloaded from: https://news.yahoo.com/sweden-extends-pause-moderna-covid-121039861.html

The FDA predicted all these adverse reactions before the COVID vaccines were made available

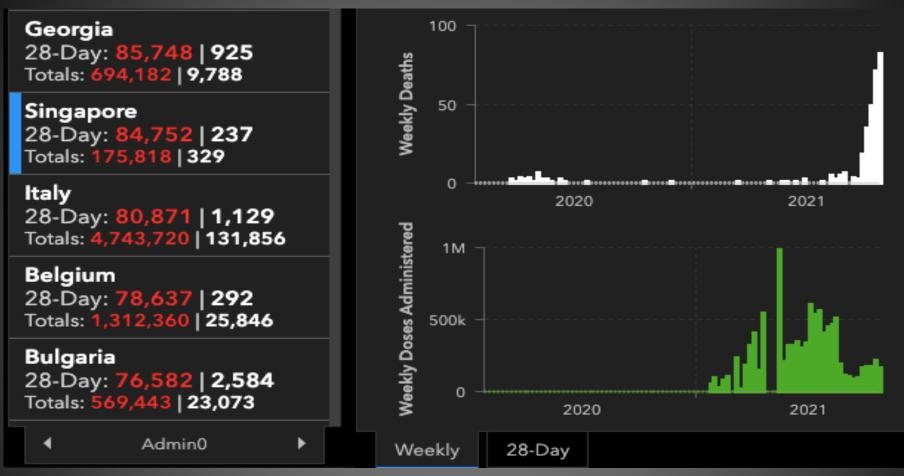
FDA Safety Surveillance of COVID-19 Vaccines: <u>DRAFT</u> Working list of possible adverse event outcomes ***Subject to change***

- Guillain-Barré syndrome
- Acute disseminated encephalomyelitis
- Transverse myelitis
- Encephalitis/myelitis/encephalomyelitis/ meningoencephalitis/meningitis/ encepholapathy
- Convulsions/seizures
- Stroke
- Narcolepsy and cataplexy
- Anaphylaxis
- Acute myocardial infarction
- Myocarditis/pericarditis
- Autoimmune disease

- Deaths
- Pregnancy and birth outcomes
- Other acute demyelinating diseases
- Non-anaphylactic allergic reactions
- Thrombocytopenia
- Disseminated intravascular coagulation
- Venous thromboembolism
- Arthritis and arthralgia/joint pain
- Kawasaki disease
- Multisystem Inflammatory Syndrome in Children
- Vaccine enhanced disease

Downloaded from the FDA's "Vaccines and Related Biological Products Advisory Committee October 22, 2020 Meeting Presentation" https://www.fda.gov/media/143557/download

COVID(?) deaths spiked in Singapore following mass vaccination



Downloaded from John Hopkin's "Coronavirus Resource Center": https://coronavirus.jhu.edu/map.html

This is not an anomaly: A similar pattern was recorded in Cambodia, Dominica, Fiji, Laos, Malaysia, Seychelles, South Korea, Taiwan, Thailand, Sri Lanka, and Uruguay. Do not take my word for it. Explore the John Hopkins website and look it up.

5. Why do the CDC and FDA continue to promote these questionable injections?



Stephen Hahn joining venture capital firm behind Moderna

BY CELINE CASTRONUOVO - 06/15/21 10:30 AM EDT



Downloaded from "The Hill" https://thehill.com/policy/healthcare/558469-stephen-hahn-joining-venture-capital-firm-behind-moderna



Downloaded from "Real Clear Politics"

https://www.realclearpolitics.com/video/2021/10/12/pfizer_board_member_former_fda_commissioner_and_cnbc_contributor_scott_got_tlieb_governors_should_not_ban_corporate_vaccine_mandates.html



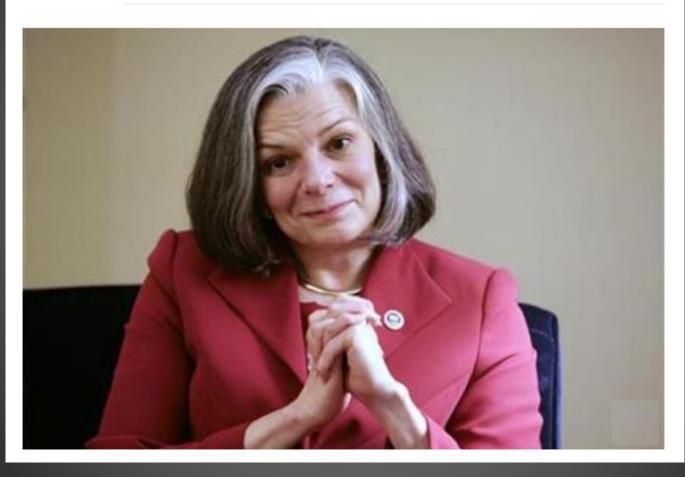
Former FDA Commissioner, Dr. Mark B. McClellan, to Join Johnson & Johnson Board of Directors

Downloaded from "Johnson & Johnson website" https://www.jnj.com/media-center/press-releases/former-fda-commissioner-dr-mark-b-mcclellan-to-join-johnson-board-of-directors

Former CDC head lands vaccine job at Merck

By Reuters Staff





Downloaded from "Reuters" <u>https://www.reuters.com/article/us-merck-gerberding-idUSTRE5BK2K520091221</u>

These are your tax dollars at work:

(READ) CDC changes definition of "vaccines" to fit Covid-19 vaccine limitations

DATED: SEPTEMBER 8, 2021 BY SHARYL ATTKISSON - 96 COMMENTS



Photo by: Kristine Wook

Downloaded from "SHARYL ATTKISSON" <u>https://sharylattkisson.com/2021/09/read-cdc-changes-definition-of-vaccines-to-fit-covid-19-vaccine-limitations/</u>

6. What is the legal criteria for "emergency use authorization"?

According to <u>U.S. Code 360bbb</u>, "expanded access to unapproved therapies" requires absence of any other "comparable or satisfactory alternative therapy."

§360bbb. Expanded access to unapproved therapies and diagnostics

(a) Emergency situations

The Secretary may, under appropriate conditions determined by the Secretary, authorize the shipment of investigational drugs or investigational devices for the diagnosis, monitoring, or treatment of a serious disease or condition in emergency situations.

(b) Individual patient access to investigational products intended for serious diseases

Any person, acting through a physician licensed in accordance with State law, may request from a manufacturer or distributor, and any manufacturer or distributor may, after complying with the provisions of this subsection, provide to such physician an investigational drug or investigational device for the diagnosis, monitoring, or treatment of a serious disease or condition if-

- (1) the licensed physician determines that the person has no comparable or satisfactory alternative therapy available to diagnose, monitor, or treat the disease or condition involved, and that the probable risk to the person from the investigational drug or investigational device is not greater than the probable risk from the disease or condition;
- (2) the Secretary determines that there is sufficient evidence of safety and effectiveness to support the use of the investigational drug or investigational device in the case described in paragraph (1);
- (3) the Secretary determines that provision of the investigational drug or investigational device will not interfere with the initiation, conduct, or completion of clinical investigations to support marketing approval; and
- (4) the sponsor, or clinical investigator, of the investigational drug or investigational device submits to the Secretary a clinical protocol consistent with the provisions of section 355(i) or 360j(g) of this title, including any regulations promulgated under section 355(i) or 360j(g) of this title, describing the use of the investigational drug or investigational device in a single patient or a small group of patients.

(c) Treatment investigational new drug applications and treatment investigational device exemptions

Upon submission by a sponsor or a physician of a protocol intended to provide widespread access to an investigational drug or investigational device for eligible patients (referred to in this subjection as an "expanded access protocol"), the Secretary shall permit such investigational drug or investigational device to be made available for expanded access under a treatment investigational new drug application or treatment investigational device exemption if the Secretary determines that-

- (1) under the treatment investigational new drug pplication or treatment investigational device exemption, the investigational drug or investigational device is intended for us in the diagnosis, monitoring, or treatment of a serious or immediately lifethreatening disease or condition;
- (2) there is no comparable or satisfactory alternative therapy available to diagnose, monitor, or treat that stage of disease or condition in the population of patients to which the investigational drug or investigational device is intended to be administered:

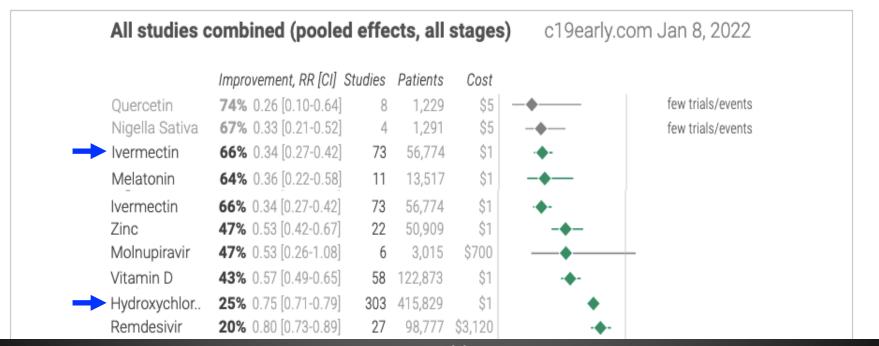
Downloaded from:

Generic outpatient therapies were suppressed so COVID vaccines could meet the conditions required for "emergency use authorization"

Their effectiveness can be corroborated by comparing data from other nations

COVID-19 early treatment: real-time analysis of 1,280 studies

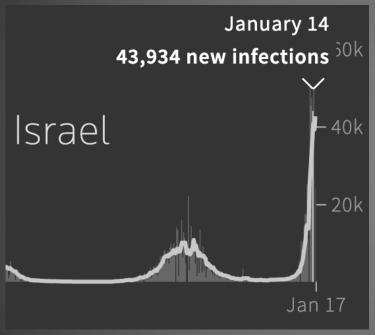
Analysis of 30 COVID-19 early treatments, database of <u>380 other potential treatments</u>. <u>67 countries</u> have approved early treatments. <u>Treatments</u> do not replace vaccines and other measures. All practical, effective, and safe means should be used. Elimination is a race against viral evolution. No treatment, vaccine, or intervention is 100% available and effective for all variants. Denying efficacy increases the risk of COVID-19 becoming endemic; and increases mortality, morbidity, and collateral damage. Recently added: Bromhexine: <u>Tolouian</u> Quercetin: <u>Rondanelli</u> Ivermectin: Kerr Nigella Sativa: <u>Esharkawy</u> Vitamin D: <u>Bilir</u> (more..).



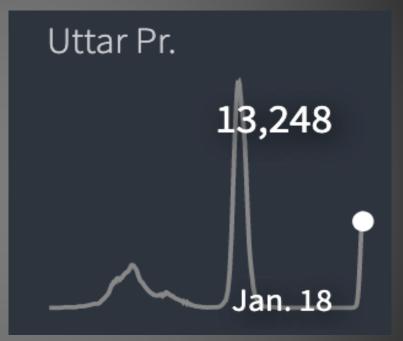
Downloaded from: https://c19early.com/

On 1/14/22, the average infection rate for new cases of COVID-19 for the (70% vaccinated) nation of Israel was 4,900 per million

On 1/18/22, the average infection rate for new cases of COVID for the Indian province of Uttar Pradesh was 55 per million



Total population: 8.9 million

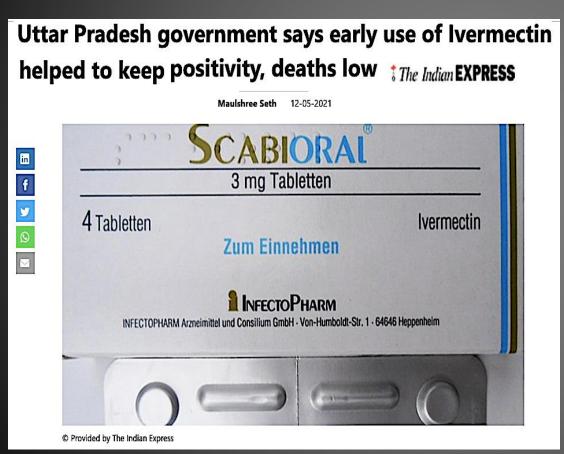


Total population: 241 million

What measures were taken in Uttar Pradesh?

Downloaded from Reuter's COVID-19 Global tracker: https://graphics.reuters.com/world-coronavirus-tracker-and-maps/ Outpatient therapeutics were widely distributed throughout the province of Uttar Pradesh due to lack of access to vaccines

The image on the right was taken by a traveler after "fact-checkers" tried to downplay the role of Ivermectin in Uttar Pradesh





Downloaded from: https://www.msn.com/en-in/news/other/uttar-pradesh-government-says-early-use-of-ivermectin-helped-to-keep-positivity-deaths-low/ar-BB1qDp5U

Nearly all health care systems in the US do not allow use of Ivermectin for COVID-19 due to FDA guidelines



Downloaded from the FDA: https://www.fda.gov/consumers/consumer-updates/why-you-should-not-use-ivermectin-treat-or-prevent-covid-19

Hospitals are so resistant to using Ivermectin for COVID-19 that dying patients often have to resort to a court order

Court order to give ivermectin to woman dying of COVID challenged by Covington hospital (1969)

St. Tammany Parish Hospital says order invites others to sue for unapproved medications

BY SARA PAGONES | STAFF WRITER OCT 4, 2021 - 4:00 AM

Downloaded from: https://www.nola.com/news/coronavirus/article_cdf07cf2-22e4-11ec-9085-870c1ea5bde0.html

Gets Ivermectin After Court Order WebMD

By Marcia Frellick

May 6, 2021 -- A 68-year-old woman with COVID-19, who has been in intensive care in an Illinois hospital for a month, started receiving the controversial drug ivermectin (Stromectol) this week after her family sued the hospital to have someone administer it, according to a report in the *Chicago Tribune*.

Downloaded from:

https://www.webmd.com/lung/news/20210506/covid-patient-in-coma-gets-ivermectin-after-court-order

This is less of a problem for members of congress

← Tweet



Pierre Kory, MD MPA
@PierreKory

Fun fact: Between 100-200 United States Congress Members (plus many of their staffers & family members) with COVID.. were treated by a colleague over the past 15 months with ivermectin & the I-MASK+ protocol at flccc.net. None have gone to hospital. Just sayin'

Downloaded from: https://twitter.com/PierreKory/status/1446312291302055940

Shockingly, even the banana republics of Honduras and El Salvador are doing a far better job of protecting their citizens from COVID-19



https://saludconlupa.com/noti cias/el-salvador-guatemala-ybolivia-ofrecen-kits-demedicinas-para-covid-19-sinprever-reacciones-adversas/

El kit contra el COVID-19 contiene acetaminofén, ácido acetilsalicílico, loratadina, ivermectina, azitromicina, vitamina C, vitamina D y zinc.

https://www.laprensa.hn/ honduras/honduras-<u>gobierno-pone-alcance-</u> poblacion-ivermectina-BWLP1441770

La Prensa

Honduras

Gobierno pone al alcance de la población la ivermectina

10 febrero 2021 / 10:02 AM / Redacción

La Secretaría de Salud informó que decidieron protocolizar el uso del medicamento como un tratamiento preventivo contra el covid-19. La OMS aún no aprueba su uso.

8. Was SARS-CoV-2 made in a lab?

According to the US National Institute of Health, SARS-CoV-2 "is likely the result of viral evolution in nature"

THE NIH DIRECTOR

October 20, 2021

Statement on Misinformation about SARS-CoV-2 Origins

To date, the origin of the SARS-CoV-2 virus that caused the COVID-19 pandemic has not been identified, despite intensive efforts to do so. This is not unusual — confirming with 100% certainty the origin of a virus is a long and complicated process. It took 14 years for scientists to find a single bat population that contained all the necessary genetic components of SARS-CoV, the virus that caused the 2003 SARS epidemic. We still do not know the origins of the 2014 Ebola outbreak.

Unfortunately, in the absence of a definitive answer, misinformation and disinformation are filling the void, which does more harm than good. NIH wants to set the record straight on NIH-supported research to understand naturally occurring bat coronaviruses at the Wuhan Institute of Virology, funded through a subaward from NIH grantee EcoHealth Alliance. Analysis of published genomic data and other documents from the grantee demonstrate that the naturally occurring bat coronaviruses studied under the NIH grant are genetically far distant from SARS-CoV-2 and could not possibly have caused the COVID-19 pandemic. Any claims to the contrary are demonstrably false.

The scientific evidence to date indicates that the virus is likely the result of viral evolution in nature, potentially jumping directly to humans or through an unidentified intermediary animal host. Historically, many viruses have emerged from animals to cause

Downloaded from https://www.nih.gov/about-nih/who-we-are/nih-director/statements/statement-misinformation-about-sars-cov-2-origins

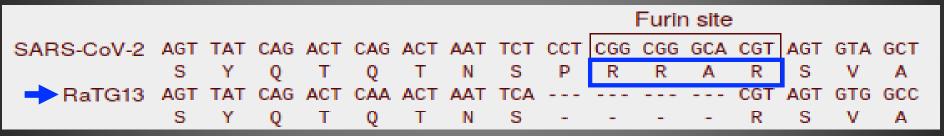
But doubts about natural origin were raised shortly after the virus was isolated due to the unique presence of the "furin cleavage site"

← Tweet

2:35 AM · Sep 14, 2020

Chinese virologist Dr Li-Meng Yan has claimed that the novel #coronavirus was made in a government controlled laboratory in Wuhan

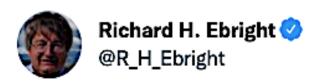
https://twitter.com/livemint/status/1305394599460913153?ref_src=twsrc%5Etfw%7Ctwcamp%5Etweetembed%7Ctwterm%5E1305394599460913153%7Ctwgr%5E%7Ctwcon%5Es1_&ref_url=https%3A%2F%2Fen.as.com%2Fen%2F2020%2F09%2F15%2Flatest_news%2F1600196698_232755.html



Downloaded from randombio.com: https://www.randombio.com/covid-furin-site.html

The FCS consists of four amino acids that occur on the "spike" protein The FCS is not found any of the other coronaviruses isolated from bats The FCS plays a key role facilitating entry of the virus into human cells The probability that the 12-base gene sequence expressing the FCS arose by means of spontaneous mutation is about 1 out of 17 million

Why does the NIH continue to double down this narrative? Perhaps they do not want to come clean about research that involved the engineering of bat virus genes at the WIV This is not a "smoking gun," but it raises important questions: Why did Directors Collins and Fauci lie when asked about this? Why is NIH throwing EcoHealth Alliance under the bus?



NIH corrects untruthful assertions by NIH Director Collins and NIAID Director Fauci that NIH had not funded gain-of-function research in Wuhan.

NIH states that EcoHealth Alliance violated Terms and Conditions of NIH grant Al110964.



Downloaded from: https://twitter.com/R H Ebright/status/1450947395508858880

Statement made at Forum on Medical and Public Health Preparedness for Catastrophic Events, February 12, 2016

https://www.ncbi.nlm.nih.gov/books/NBK349040/

We need to increase public understanding of the need for medical counter-measures such as a pan-coronavirus vaccine.

A key driver is the media, and the economics

will follow the hype.



...it's easy to criticize, but they're really criticizing science because I represent science



Anthony Fauci

Those who are capable of tyranny are capable of perjury to sustain it.



Lysander Spooner